Case:20-02518-EAG13 Doc#:20 Filed:11/04/20 Entered:11/04/20 16:49:29 Desc: Main Document Page 1 of 6

IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

IN THE MATTER OF:	CASE NO. 20-02518-BKT
CHARLES MARTINEZ FONTANEZ AMARILIS SEMIDEY ALICEA	CHAPTER 13
Debtor	

STATEMENT OF PURPOSE TO AMEND SCHEDULE I AND J

TO THE HONORABLE COURT:

NOW COMES debtor through the undersigned counsel and respectfully alleges and prays:

- 1. In compliance with Federal Rule of Bankruptcy Proceeding 1009 and Local Bankruptcy Rule 1009-1, debtor provides a Statement Purpose as to the amended the Schedule I and J.
- 2. Debtor is filing an amended Schedule I and J to disclose the current expenses and income correctly in order to comply with the payment of the Chapter 13 Plan.

WHEREFORE, debtor prays this Honorable Court to grant this Honorable Court to be acknowledged of this motion and take note of the amendment.

CERTIFICATE OF ELECTRONIC FILING AND SERVICE

I hereby certify that on this date copy of this motion has been electronically filed with the Clerk of the Court using the CM/ECF system which will send notification of such filing to **JOSE R. CARRION**MORALES Chapter 13 Trustee and also certify that I have mailed by United State Postal Service copy of this motion to the non CM/ECF participants.

RESPECTFULLY SUBMITTED.

In Guayama, Puerto Rico, this 4th day of November, 2020.

/s/MANUEL E. FUSTER MARTINEZ
ATTORNEY FOR DEBTOR
PO BOX 1464
GUAYAMA, P.R. 00785
PHONE: (787) 864-3015
FAX: (787) 866-1827

E-MAIL: fuster_law_office@yahoo.com

USDC-PR 00513

Fill in this information	n to identify your case:	
Debtor 1	CHARLES MARTINEZ FONTANEZ	
Debtor 2 (Spause, if filing)	AMARILIS SEMIDEY ALICEA	
United States Bank	ruptcy Court for the: DISTRICT OF PUERTO RICO	
Case number	20-02518	Check if this is:
(If known)		An amended filing
Official For	<u> </u>	A supplement showing postpetition chapter 13 income as of the following date: 10/22/2020 MM / DD/ YYYY
Schedule I	: Your Income	12/15
supplying correct is spouse. If you are sattach a separate s	d accurate as possible. If two married people are filing togethe nformation. If you are married and not filing jointly, and your sy separated and your spouse is not filing with you, do not includ heet to this form. On the top of any additional pages, write you ribe Employment	pouse is living with you, include information about your a information about your spouse. If more space is needed,
4		

Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed if you have more than one job, **Employment status** attach a separate page with □ Not employed □ Not employed information about additional employers. Occupation SECURITY GUARD OCCUPATIONAL THERAPIST Include part-time, seasonal, or RM SECURITY **COOP DE TERAPEUTAS** self-employed work. Employer's name SOLUTIONS,LLC ASOCIADOS DE PR Occupation may include student or homemaker, if it applies. Employer's address SECT LA LINEA PO BOX 366908 HC 63 SAN JUAN PR.00936 BOX 3984 PATILLAS, PR 00723 San Juan, PR 00917 How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1		For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	1,160.00	\$	1,048.50
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$ _	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	1,160.00	\$	1,048.50

Official Form 106I

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Debi Debi	tor 1 tor 2	CHARLES MARTINEZ FONTANEZ AMARILIS SEMIDEY ALICEA	EZ Case number (if known)		20-02518			
				Fo	or Debtor 1		Debtor 2 or filing spouse	
	Cop	y line 4 here	4.	\$	1,160.00	\$	1,048.50	
5.	List	all payroli deductions:						
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a. 5b. 5c.	\$ \$ \$	116.00 0.00 0.00	\$ \$	0.00 0.00 0.00	
	5d. 5e. 5f. 5g.	Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5d. 5e. 5f. 5g.	\$ \$ \$	0.00 0.00 0.00 0.00	\$ 	0.00 0.00 0.00 0.00	
	5h.	Other deductions. Specify:	5h	+ \$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	116.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,044.00	\$	1,048.50	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0,00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	\$	0.00	\$	0.00	
	•	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$ 	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: PAN BENEFIT	8e. 8f.	\$. \$	760.00	\$ \$	0.00	
	8g.	Pension or retirement income	- 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify	_ 8h.	+ \$	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	760.00	\$	66.00	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	6	1,804.00 + \$	1,1	14.50 = \$ 2	,918.50
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00							
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies	ult is t in Liat	the co pilities	ombined monthly i s and Related <i>Data</i>	ncome. a, if it	Combine	
13.	Do	you expect an increase or decrease within the year after you file this form. No.	7				monthly i	ırıcome
		Yes. Explain:						1

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:				
Debi	tor 1 CHARLES MARTINEZ FONTANEZ		Che	eck if this is:	
Debi	tor 2 AMARILIS SEMIDEY ALICEA puse, if filing)			An amended filing A supplement show 13 expenses as of t	ring postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the DISTRICT OF PUERTO RICO			MM / DD / YYYY	
	e number 20-02518				
Of	ficial Form 106J				
Sc	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this for high moder (if known). Answer every question.				
Par	11: Describe Your Household				
1.	Is this a joint case?	<u> </u>			
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No Yes, Debtor 2 must file Official Form 106J-2, Expenses	for Separate Househo	old of De	btor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2 Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names,				Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include		~		☐ Yes
J.	expenses of people other than yourself and your dependents?				
Est	t2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppliciable date.	ou are using this for lemental Schedule J	m as a s ', check	supplement in a Cha the box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your exp	enses
,	,				
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	400.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance			\$	0.00
	4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues			\$	0.00
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	4d. 5.		0.00

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ebtor 2	CHARLES MARTINEZ FONTANEZ AMARILIS SEMIDEY ALICEA Ca	ise num	ber (if known)	20-02518
Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	180.00
6b.	Water, sewer, garbage collection	6b.	\$	120.50
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
6d.	Other, Specify: INTERNET	6d.	\$	90.00
Food	and housekeeping supplies	7.	\$	400.00
	care and children's education costs	8.		0.00
	ning, laundry, and dry cleaning	9.		100.00
	onal care products and services	10.		150.00
	cal and dental expenses	11.	-	200.00
	sportation, Include gas, maintenance, bus or train fare.		*	
	ot include car payments.	12.	\$	400.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.	\$	60.00
. Insu			-	
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.		0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	52.00
15d.	Other insurance. Specify:	15d.	\$	0.00
. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	_	3	=======================================
Spec	ify: IRS (1040-PR)	16.	\$	53.00
. Insta	Ilment or lease payments:	_	-	
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
You	payments of alimony, maintenance, and support that you did not report as		2001	
	acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	268.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec		_ 19.		
	r real property expenses not included in lines 4 or 5 of this form or on Schedu			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0,00
	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify: Lodging (University)	21.	+\$	100.00
Toll	5	_	+\$	40.00
		_		
	ulate your monthly expenses		_	
	Add lines 4 through 21.		\$	2,793.50
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,793.50
Calc	ulata your monthly not income			
	ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.040.50
	Copy your monthly expenses from line 22c above.		•	2,918.50
230.	Copy your monthly expenses non-line 220 above.	23b.	- ə	2,793.50
234	Subtract your monthly expenses from your monthly income.			:
200.	The result is your monthly net income.	23c.	\$	125.00
	ou expect an increase or decrease in your expenses within the year after you		s form?	
Fore	xample, do you expect to finish paying for your car loan within the year or do you expect your mi fication to the terms of your mortgage?	ortgage	payment to incr	ease or decrease because of
Fore	xample, do you expect to finish paying for your car loan within the year or do you expect your mi ication to the terms of your mortgage?	ongage	payment to incr	ease or decrease because of

_ Official Form 106J

Fill in this info	rmation to identify your case	:				
Debtor 1	CHARLES MARTINEZ	FONTANEZ				
	First Name	Middle Name	Last Name			
Debtor 2	AMARILIS SEMIDEY	NO. 100 100 100 100 100 100 100 100 100 10				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the: DIS	STRICT OF PUERTO RIC	0			
Case number	20-02518					
(if known)	<u> </u>				Check if this is amended filing	an
Official For	rm 106Dec					
Declara	ition About an	<u>Individual D</u>	ebtor's Sched	ules		12/15
If two married	people are filing together, bo	th are equally responsib	le for supplying correct info	rmation		
You must file t	his form whenever you file ba	inkruptcy schedules or	amended schedules. Making	a false stat	tement, concealing prope	rty, or
	ey or property by fraud in cor 18 U.S.C. §§ 152, 1341, 1519,		tcy case can result in fines t	ip to \$250,0	oo, or imprisonment for u	p to 20
yours, or boun.	10 0.0.0. 33 102, 10 11, 10 10,	G112 007 11				
Si	gn Below					
Did you p	pay or agree to pay someone	who is NOT an attorney	to help you fill out bankrupt	cy forms?		
■ No						
☐ Yes.	Name of person				nkruptcy Petition Preparer's n, and Signature (Official Fo	
				000.0,000	, and organitary (ormalar)	1107
Underne	saltur af marium. I dan laka shak	1 ha d th			·	~ 1
that they a	nalty of perjupy I declare that are true and correct.	riave read the summar	y and schedules filed with th	is declarad	on and	1//
			(1) //	OL 1	Lull	//
x			× anch		- Cy W	
	RLES MARTINEZ FONTAN ture of Debtor 1	EZ	AMARILIS SEMIDI Signature of Debtor 2		4	
Date	11-04/20	20	Date			
	·					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules